## Ship Accommodation Area Hygiene Audit Form

Date of Audit									
Auditor Name									
Auditor Name									
Ship Name									
Location									
Location									
A	Criteria	Status (Satisfactory) Insetisfactory)	Da waa uka						
Area	Criteria	Status (Satisfactory/Unsatisfactory)	Remarks						
Cabins	Cleanliness								
Toilets/Bathrooms	Cleanliness, Supplies								
Mess Room	Classinasa Tahlaunga								
Wess Room	Cleanliness, Tableware								
Galley	Cleanliness, Equipment								
	, , ,								
Common Areas	Cleanliness								
Laundry	Cleanliness, Functionality								
Others									
General Comments	S								
Recommendations									
Auditor Signature									
, aditor digitature									

Date		